

# Idaho Department of Juvenile Corrections

# Juvenile Corrections Center - Nampa

# **SOLUTIONS UNIT**

October 2009

### SOLUTIONS TREATMENT TEAM

The Co-Occurring Disorder Unit, also known as "Solutions", is a 24-bed unit based in the JCC-Nampa facility. The 24 beds consist of one 12-bed unit for female youth and one 12-bed unit for male youth who are committed to the Idaho Department of Juvenile Corrections. These juveniles have at least one mental health disorder and a history of at least substance use, abuse or dependence.

This program may be an initial placement for youth when they are first committed to the IDJC. The Solutions program may also serve juveniles who have had to be removed from another IDJC state facility or contract placement because they were not able to function in those types of treatment settings due to their co-occurring disorders. Solutions will accept youth between the ages of 14 and 20 years old. The estimated length of stay for youth in Solutions is approximately 12 months.

The treatment methods of the Solutions program include the methods also used in the other IDJC programs such as accredited education, victim accountability, and involvement of families. The Solutions Unit's treatment methods differ from other IDJC programs through having a more individualized approach to the needs of the juvenile, and increased clinical and

psychiatric services.



The therapeutic components of the Solutions program are derived from the principles of Balanced and Restorative Justice, strength-based and research-based interventions, and are in a learning environment of therapeutic relationships. The main goals of the program are to increase community safety, hold the juveniles accountable for their behaviors, and build competencies in the areas of education, physical fitness, spiritual growth, trauma resolution, mental health, abstinence from substance abuse, and healthy interpersonal relationships.

Interventions used include: Dialectical Behavioral Therapy (DBT), stages of change theory, treatment for substance abuse/dependence, and an emphasis on holistic health and growth in body, mind, and spirit. Specific techniques used include educational/vocational training, functional assessments, Change Company journals, medication management, Aggression Replacement Training (ART), Motivational Interviewing, role modeling by family, staff, and community mentors, group counseling, individual counseling, family counseling, daily

accountability and recognition for individual behavior and the behaviors of the group as a whole. Strong emphasis throughout treatment in the Solutions unit is placed on measurable outcomes and preparation of the juvenile returning to live in the community in the least restrictive environment.

#### **Current Solutions Status**

We have been accepting juveniles on the unit since August 6, 2008. We have met a few challenges due to having primarily new staff that have little experience working with this particular population. We have made progress in developing the teamwork and skills that are necessary to help juveniles who have co-occurring disorders. We have made several adjustments to the programming as we are learning what works with this population and what doesn't. We have also transferred out several juveniles who were not appropriate for the unit because they did not fit the criteria. We have developed more clarity about what juveniles will benefit from the program and which ones will not. We have also had to adjust our staffing patterns because of budgetary issues.

Though we have had to reduce the number of our clinicians from four to three, we have recently been able to hire a Rehabilitation Technician Supervisor. This has taken a great deal of the load off of the clinicians which has allowed them to focus on the juveniles.

On a positive note, many of our juveniles who have not done well in other programs are doing well in Solutions and as a result are progressing through the program. We have been able to transfer two juveniles who were doing exceptionally well, to a lower level of care and we have had nine juveniles who have graduated.

The Solutions clinician's include Laura Watson, Ashley Jorgensen and O'Neal Rich. They meet with their assigned youth twice per week, run groups, meet with families and run staffings.

### Demographics for Current Solutions Juvenile Population

**Gender:** Females - 12 Males - 12 **Females By Age:** 14-1, 16-4, 17-4, 18-3 **Males By Age:** 15-3, 16-1, 17-2, 18-4, 19-2



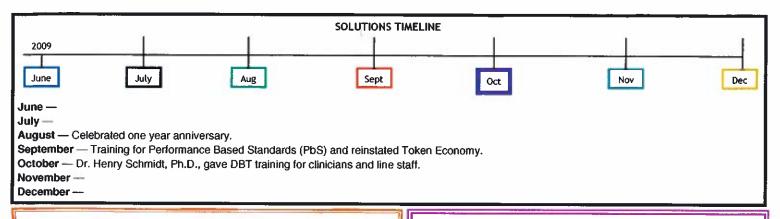
Juveniles By District:	District	Juvenile
	1	3
	2	1
	3	8
	4	8
	5	4
	6	0
	7	0



The Solutions juveniles seem to be enjoying the workout they get while doing "Yogatherapy". They work up a sweat, improve posture, balance, flexibility and strengthen their core. All of these things enhance their self-esteem and help them to view them-

selves in a more positive way. They are becoming better able to relax and reduce anxiety, and they are experiencing how to be more contained in their bodies rather than being outer-focused and distracted by the environment. More than the physical benefits of Yoga, the "therapy" includes helping them learn to check in with themselves, be in a non-competitive and non-judgmental environment where they can focus on one thing at a time and feel successful.

Valarie Zuniga, Clinical Supervisor/Yoga Instructor



#### Dialectical Behavioral Therapy

Dialectical Behavioral Therapy (DBT) is a skills training therapy created by Marsha Linehan. DBT focuses on four different core sets of skills: mindfulness skills. interpersonal effectiveness skills, emotion regulation skills, and distress tolerance skills. Mindfulness skills assist the juveniles with focusing on the moment and learning to take one thing at a time. Interpersonal effectiveness skills help the juveniles to be able to get their needs met in a pro-social and effective way while learning how to maintain relationships. Emotional regulation skills are imperative when it comes to teaching the juveniles how to better manage their emotions and regulate them so as to refrain from reacting on extreme emotions. Distress tolerance skills assist in teaching the juveniles how to handle difficult situations without decompensating and/or stuffing their emotions. The juveniles have worked hard to be able to not only learn these skills but to be better able to recognize the appropriate situations in which to implement them. They are using them with greater frequency and can communicate when they have used them and the positive benefit they have had on any given situation. This seems to be a very effective skills training course for many of the juveniles in our custody

Thanks to funding provided by the Juvenile Justice Commission, Dr. Henry Schmidt III, Ph.D., the Clinical Director for the Washington Department of Social and Health Services visited the Solutions unit October 1 -3 and gave the clinicians and line staff training on DBT and also gave a group demonstration for the female and male juveniles. He will be providing consultation to the unit when needed. By Laura Watson, Clinician

### The Future of Solutions

We continue to work on focusing on our juveniles' strengths rather then their problems. We have started assigning staff mentors, and have reinstated the token economy. We are also in the beginning stages of Performance-based Standards (PbS). As we move into the future, we will continue to work on developing a strong team that is focused on assisting our juveniles in making better decisions.

#### **Victims Panel**

In February and in September, some of the female juveniles were members of a victim panel and were able to share their: experience with some of the Choices male juveniles. The girls shared that the treatment from guys in the past had affected them physically, mentally and emotionally. They talked about how their poor image of self-worth was the outcome of those relationships with feelings of rejection and hurt. They sought solace in drugs, alcohol, sex and self-abusing behaviors and took risks without regard for themselves. The girls also shared what they really need and look for in a relationship. They talked of the long road of healing and recovery and what they are trying to do to have healthy relationships. The girls felt empowered by the opportunity to be heard and respected for what they shared. They were able to ask questions of the males and tried to seek understanding of why some of the things may have happened to them. It was a very healthy discussion for both groups.

By Colleen Foster, Rehabilitation Specialist

#### Community Service

The Solutions program has completed the needed staff training and orientation to begin their first community service outings. They are currently in contact with several organizations and are in the process of confirming dates and times for community service passes in the near fu-

ture. Those organizations are: Boise Parks and Recrea-

tion (Adopt the Greenbelt), Canyon County Animal Shelter, Hopes Door, Idaho Humane Society, Simply Cats, Women's and Children's Alliance, and Zoo Boise. The staff are also continuing to search for more volunteer opportunities at other organizations, as the community service program is new and growing. The juveniles that are approved to go on community service passes are on the last level of the Solutions program, Maroon Level, and the opportunity may be extended to the Gold Level, which is the third level of the four level program. They are anxious and excited to launch their community service program in order to offer the juveniles in their custody a chance to establish a positive relationship within their community.

By Francine Diaz, Rehabilitation Technician

### Updates on Solutions Juveniles

Male juvenile: After spending nearly two years in state custody and failing to complete programs at both the Idaho Youth Ranch and the Juvenile Corrections Center in Lewiston, this young man was able to complete his program on the Solutions Unit. While he had learned many program skills in previous placements, he was able to attain personal mastery over them while on the Solutions Unit. He was provided the opportunity to utilize his natural leadership abilities through obtaining group coordinator positions, thus positively influencing his peers. This youth participated in and benefitted from individual counseling, program work, and personal effort, which culminated in the successful completion of his program. This juvenile was the first to complete the Solutions program on March 25, 2009. He was released to his adoptive parents in northern Idaho, where he has successfully completed his probation and is working on the last test to earn his GED. Through using resources available to him in the Solutions Program, this young man demonstrated the drive, motivation, and intellect necessary to navigate the system and eventually successfully reintegrate into the community.

- 19-Discharged
- 9-Graduated to Home
- 2-Step Down Facility
- 2-Returned to State Hospital South
- 0-Re-commits

- September Home Passes-11
- September Family/Counseling Visits—48
- \* Average length of stay for those currently in the Solutions program is 7.4 months.
- \* Average length of stay for those juveniles who graduated or went to a step down facility is 8.8 months.